supplemental priority data sheet PTO/SB/02B attached hereto.

rease type a plus sign inside this box i		PI	O/SB/01 (12/97)	App	roved for u	ise through 09	730/00, OMB 0651-0032		
O P EDECLARATION	ON FOR UT	FILITY	OR	Attorne	y Docke	t Number	M		
	DESIGN FAPPLICA			First N	amed Inv	entor	Foster, et al		
buo.	7 CFR 1.63)					COMPLET	TE IF KNOWN		
Declaration	,			Applica	ition Nun	nber			
☐ Declaration Submitted OR		Declaratio	on I after Initial	Filing I	Date :	**************************************			
with Initial]	Filing (su	rcharge	Group	Art Unit				
Filing		(37 CFR required)	1.16(e))	Examiner Name					
As a below named inventor,	I hereby decla	are that:					· · · · · · · · · · · · · · · · · · ·		
My residence, post office add	ress, and citize	nship are	as stated below ne	ext to my	name.				
						aniainal Ea			
names are listed below) of the	I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:								
INHIBITION OF SECRETION FROM NON-NEURONAL CELLS									
the specification of which (Title of the Invention) is attached hereto OR									
■ was filed on (MM/D	was filed on (MM/DD/YYYY) O3/20/2002 as United States Application Number or PCT International								
Application Number 10/	088,665	and	was amended on (MM/DD/	YYYY)		(if applicable).		
I hereby state that I have revi- by any amendment specificall			e contents of the ab	ove ident	ified spe	cification, i	ncluding the claims, as amended		
I acknowledge the duty to dis	close informati	on which	is material to pate	ntability a	as define	d in 37 CFF	1.56.		
I hereby claim foreign priorit certificate, or 365(a) of any P America, listed below and ha certificate, or of any PCT into	CT internation ve also identific	al applicated below.	ation which designate, by checking the b	ated at lea ox, any f	ist one co oreign ap	ountry other	than the United States of repatent or inventor's		
Prior Foreign Application (Numbers)	Countr	y	Foreign Filing (MM/DD/YY)			riority Claimed	Certified Copy Attached? YES NO		
PCT/GB00/03681	PCT		09/25/2000						
9922558.3	GB		09/23/1999						
	, ···								
☐ Additional foreign ap	oplication numb	pers are l	isted on a suppleme	ental prio	rity data	sheet PTO/	SB/02B attached hereto.		
I hereby claim the benefit und	ier 35 U.S.C.	119(e) of	any United States	provision	al applic	ation(s) liste	d below.		
Application Number(s) Filing Date (MM/DD/YYYY)									
•							dditional provisional application		

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DECLARATION - Utility or Design Patent Application

I hereby claim the benefit under 35 U.S.C. 120 of any United States application(s), or 365(c) of any PCT international application designating the United States of America, listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States or PCT International application in the manner provided by the first paragraph of 35 U.S.C. 112, I acknowledge the duty to disclose information which is material to patentability as define

in 37 CFR 1.5	6 which became a	available be	tween the f	iling date of the	prior app	licatio	on and the	national or PC	T internati	onal filing	date of this applic	ation.
U.	S. Parent Ap	plication Number		Parent				Filing Date DD/YYYY)		P	arent Patent N (if applicab	
P	CT/GB00/0368	31		*		9/2	25/2000					
☐ Ad	ditional U.S. or P	PCT interna	tional appli	cation numbers a	are listed	on a s	supplemer	ntal priority dat	a sheet PT	O/SB/02B	attached hereto.	
As a named in Office connec		appoint the	following 1	registered practit	ioner(s) to	o pros	secute this	s application an	d to transa	ct all busin	ess in the Patent a	nd Trademark
Customer 1				•			0000	26712		\rightarrow	- 11	e Customer per Bar Code
■ Registered	OR practitioner's nar	me/registra	tion numbe	r listed below							L.	abel Here
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Ranjana Kadle John M. Del Vecchio Martin G. Linihan Kevin D. McCarthy David L. Principe 40,041 42,475 24,926 35,278 39,336					A		Mich Patr Dani	ent Rob ael F. ick J. el C. C n T. Be	Scali Tracy Niver	rio	40,78 34,92 42,18 33,43 16,63	0 7 5
□Additional	registered practiti	ioner(s) nar	ned on sup	plemental Registe	ered Pract	titione	er Inform	ation sheet PTC	D/SB/02C a	ttached he	reto	
Direct all o	correspondenc	e to: 🗆		ner Number Code Label				OR		Corres	pondence addre	ss below
Name	Name Ranjana Kadle											
Address	Hodgson Ru	ss LLP										
Address	One M&T P	laza, Sui	te 2000									
City	Buffalo		73		State	-	New York ZIP			IP ·	14203-2391	
Country	United State	s	Teleph	one	(716)) 856-4000 Fax				ax	(716) 849-0349	
further that t	are that all staten hese statements w	iere made v	vith the kno	wledge that will	ful false s	tatem	ients and 1	the like so mad	e are punis	nable by II	pelief are believed to the or imprisonmen	o be true; and it, or both, under
	Sole or First l							been filed			inventor	
	Given Nan	ne (first a	ınd middl	le [if any])			v		Family	Name o	r Surname	
		Keith	Alan							Foste	r	
Inventor's Signature											Date	
Residence		Salisbu	ry	State	e Wi	ltshi	re	Country	GB (BBN	Citizenship	GB
	ce Address			hampton Road	i, Whad	ldon						
	ce Address											
City	<u> </u>	Salisbu	ry	Stat	e Wi	ltshi	shire ZIP SP5 3DX			Country	GB	
■ Additio	nal inventors	are being	named o	on the 1 suppl	emental	Add	ditional	Inventor(s)	sheet(s) l	PTO/SB	02A attached h	ereto.
							2 of 31					

DECLARATION – Utility or Design Patent Application

I hereby claim the benefit under 35 U.S.C. 120 of any United States application(s), or 365(c) of any PCT international application designating the United States of

s a named inventor, I hereby appoint the following registered practitioner(s) to prosecute this application and to transact all business in the Patent and Trademark ffice connected therewith: Customer Number			- 4 h 4h £.	met maragraph	あっそろち ロ S C	117 Lackno	wiedge ine	auty to disclose	e iiiioiiiiai	ion winch i	s material to paten date of this applica	taumity as ucin
Additional U.S. or PCT international application numbers are listed on a supplemental priority data sheat PTO/SB/02B stateshed hereto. *** a faunated inventor*, I herethy appoint the following registered practitioner(s) to prosecute this application and to transact all business in the Patent and Trademark flice connected therewith: **Plane Cautomer Number** **Registered practitioner's name/registration number listed below **Registration Name** **Registration N	U.S	S. Parent App	plication Number	or PCT I	Parent					P		
as named inventor, I hereby appoint the following registered practitioner(s) to prosecute this application and to transact all business in the Patent and Trademark Iffice connected therewith: Customer Number Place Customer Number Registration Registration Number Registration Number Registration		PCT/GBOO	/03681			Ģ	9/25/200	0				
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City Buffalo Country United States Telephone Thereby declare that all statements made herein of my own knowledge are true and that all statements made on imprisonment, or both, under that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under that these statements and the like so made are punishable by fine or imprisonment, or both, under the statements and the like so made are punishable by fine or imprisonment, or both, under that the statements and the like so made are punishable by fine or imprisonment, or both, under the statements and the like so made are punishable by fine or imprisonment, or both, under the statements and the like so made are punishable by fine or imprisonment, or both, under the statements and the like so made are punishable by fine or imprisonment, or both, under the statements and the like so made are punishable by fine or imprisonment, or both, under the statements and the like so made or imprisonment, or both, under the statements and the like so made or impri	John M. Del Vecchio Martin G. Linihan Kevin D. McCarthy 42,475 24,926 35,278						Mich Patr Dani	ael F. ick J. el C. O	Scali Tracy live:	/ cio	34,92 42,18 33,43	0_ 7_ 5_
Name Ranjana Kadle Address Hodgson Russ LLP Address One M&T Plaza, Suite 2000 City Buffalo State New York ZIP 14203-2391 Country United States Telephone (716) 856-4000 Fax (716) 849-0349 I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon. Name of Sole or First Inventor: A petition has been filed for this unsigned inventor Given Name (first and middle [if any]) Family Name or Surname Keith Alan Foster Inventor's Signature Residence: City Salisbury State Wiltshire Country GB Citizenship GB Post Office Address City Salisbury State Wiltshire ZIP SP5 3DX Country GB	☐Additional :	registered practiti	oner(s) nan	ned on suppl	emental Registe	red Practitio	ner Inform	ation sheet PTO	/SB/02C a	attached he	reto	
Address One M&T Plaza, Suitz 2000 City Buffalo States New York ZIP 14203-2391 Country United States Telephone (716) 856-4000 Fax (716) 849-0349 Thereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon. Name of Sole or First Inventor: A petition has been filed for this unsigned inventor Given Name (first and middle [if any]) Family Name or Surname Keith Alan Foster Inventor's Signature Residence: City Salisbury State Wiltshire Country GB Citizenship GB Post Office Address The Croft, Southampton Road, Whaddon Post Office Address City Salisbury State Wiltshire ZIP SP5 3DX Country GB	Direct all c	orrespondence	e to: D	•		0000 26	712	OR		Corres	oondence addre	ss below
Address One M&T Plaza, Suite 2000 Country Buffalo Telephone (716) 856-4000 Fax (716) 849-0349 Thereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon. Name of Sole or First Inventor: Given Name (first and middle [if any]) Family Name or Surname Keith Alan Foster Inventor's Signature Residence: City Salisbury State Wiltshire Country GB Citizenship GB Post Office Address City Salisbury State Wiltshire ZIP SP5 3DX Country GB	Name	Ranjana Kad	lle									
Country United States Telephone (716) 856-4000 Fax (716) 849-0349 Thereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon. Name of Sole or First Inventor: Given Name (first and middle [if any]) Keith Alan Foster Inventor's Signature Residence: City Salisbury State Wiltshire Country GB Citizenship GB Citizenship GB City Sp5 3DX Country GB	Address	Hodgson Ru	ss LLP									
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Thereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon. Name of Sole or First Inventor: Given Name (first and middle [if any]) Family Name or Surname Keith Alan Foster Inventor's Signature Residence: City Salisbury State Wiltshire Country GB Citizenship GB Post Office Address City Salisbury State Wiltshire ZIP SP5 3DX Country GB	City	Buffalo	,			State	New York ZIP			IP	14203-2391	
Inventor's Signature Residence: City Salisbury State Wiltshire State Wiltshire ZIP SP5 3DX Country GB	Country	United State	s	Telepho	ne	(716) 85	6-4000	· ·	F	ax	(716) 849-0349	
Name of Sole or First Inventor: Given Name (first and middle [if any]) Keith Alan Inventor's Signature Residence: City Salisbury The Croft, Southampton Road, Whaddon Post Office Address City Salisbury State Wiltshire Wiltshire ZIP SP5 3DX Country GB Country GB City GB	I hereby decl		iara mada ii	with the know	viedge that WillT	ui taise state	ments and	the like so made	c are punis	snable by n	pelief are believed to the or imprisonmen	to be true; and at, or both, und
Family Name or Surname											inventor	
Inventor's Signature Residence: City Salisbury State Wiltshire Country GB Citizenship GB Post Office Address Post Office Address City Salisbury Salisbury State Wiltshire The Croft, Southampton Road, Whaddon City Salisbury State Wiltshire ZIP SP5 3DX Country GB	7 144110 07				[if any])				Family	Name o	r Surname	
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City Salisbury State Wiltshire ZIP SP5 3DX Country GB					-							
		THE PARTY SALVE	Salisbu	ry	State	Wiltsl	hire	ZIP	SP5 31	DX	Country	GB
		onal inventors	<u> </u>		n the 1 supple	emental A	dditional	Inventor(s)	sheet(s)	PTO/SB	/02A attached l	ereto.

[Page 2 of 3]

DECLARATION

AUG 1 4 2002 .

ADDITIONAL INVENTOR(S) Supplemental Sheet Page 3 of 3

Name of Additional Jo	int Inventor, if any:	MADEM	□ A peti	tion has bee	n filed for this u	nsigned invento	r	
Given Nan	ne (first and middle [if an	1y])			Family Name o	r Surname		
	John Andrew			Chaddock				
Inventor's Signature	fa	Elhai	ddo dr			Date	75/06/02	
Residence: City	Salisbury	State	Wiltshire	Country	GB	Citizenship	GB	
Post Office Address	43 Bouchers Way	43 Bouchers Way						
Post Office Address								
City	Salisbury	State Wiltshire ZIP SP2 8RW			SP2 8RW	Country	GB	
Name of Additional Jo	int Inventor, if any:		☐ A pet	tion has bee	n filed for this u	nsigned invento	r	
Given Nan	ne (first and middle [if a	ny])			Family Name of	or Surname		
, , , , , , , , , , , , , , , , , , ,	Conrad Padraig		Quin	1				
Inventor's Signature						Date		
Residence: City	Lilburn	State	GA	Country	USA	Citizenship	GB	
Post Office Address	4986 Fox Forest Drive					· .	·	
Post Office Address								
City	Lilburn	State	GA	ZIP	30047	Country	USA	
Name of Additional Jo	int Inventor, if any:		☐ A pet	ition has bee	n filed for this u	nsigned invento	r	
Given Nan	me (first and middle [if a	ny])		Family Name or Surname				
	John Robert				Purkis	SS	·	
Inventor's Signature						Date		
Residence: City	Southampton	State		Country	GB	Citizenship	GB	
Post Office Address	Immunopharmacology	Group, So	outhampton Gene	eral Hospital	· · · · · · · · · · · · · · · · · · ·			
Post Office Address								
City	Southampton	State		ZIP	SO16 6YD	Country	GB	



Approved for use through 09	Approved for use through 09/30/00, OMB 0651-0032								
Attorney Docket Number									
First Named Inventor	Foster, et al.								
COMPLE	TE IF KNOWN								
Application Number									
Filing Date									
Group Art Unit									
Examiner Name	·								

DECLARATION FOR UTILITY OR DESIGN PATENT APPLICATION (37 CFR 1.63)

Submitted with Initial Filing

OR

Declaration
Submitted after Initial
Filing (surcharge

(37 CFR 1.16(e)) required)

As a below named inventor, I hereby declare that:

My residence, post office address, and citizenship are as stated below next to my name.

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

INHIBITION OF SECRETION FROM NON-NEURONAL CELLS								
the specification of which ☐ is attached hereto OR	(Title of the Invention)							
was filed on (MM/DD/YYYY) Application Number 10/088,665	and was amended on (MM/DD/YYYY) (if applicable).							
I hereby state that I have reviewed and und by any amendment specifically referred to	derstand the contents of the above identified specification, including the claims, as amended above.							
I acknowledge the duty to disclose information	ation which is material to patentability as defined in 37 CFR 1.56.							
I hereby claim foreign priority benefits un	der 35 U.S.C. 119(a)-(d) or 365(b) of any foreign application(s) for patent or inventor's							

I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or 365(b) of any foreign application(s) for patent or inventor's certificate, or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent or inventor's certificate, or of any PCT international application having a filing date before that of the application on which priority is claimed.

Prior Foreign Application (Numbers)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Certified Copy Attached? YES NO
PCT/GB00/03681 9922558.3	PCT GB	09/25/2000 09/23/1999	_ _ _	

Additional foreign application numbers are listed on a	a supplemental priority	v data sheet PTO/SB/02B attached hereto.

I hereby claim the benefit under 35 U.S.C. 119(e) of any United States provisional application(s) listed below.

Application Number(s)	Filing Date (MM/DD/YYYY)	
•		Additional provisional application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.

DECLARATION AUG 1 4 2002

ADDITIONAL INVENTOR(S) Supplemental Sheet Page 3 of 3

		CTABENIA!							
Name of Additional J	oint Inventor, if any:		. [☐ A pet	ition has be	en filed for this 1	unsigned invent	or	
Given Na	me (first and middle [if a	any])	·			Family Name	or Surname		
	John Andrew			Chaddock					
Inventor's Signature							Date		
Residence: City	Salisbury	State	Wiltshi	re	Country	GB	Citizenship	GB	
Post Office Address	43 Bouchers Way	-				<u> </u>			
Post Office Address	<u>``</u>								
City	Salisbury	State	State Wiltshir		ZIP	SP2 8RW	Country	GB	
Name of Additional Jo	oint Inventor, if any:			———— □ A pet	ition has bee	en filed for this u	insigned invento	or	
Given Na	me (first and middle [if a	any])			Family Name or Surname				
	Conrad Padraig					Quin	n	<u> </u>	
Inventor's Signature	C.P.		<u></u>			Date	1st July 02		
Residence: City	Lilburn	State	GA		Country	USA	Citizenship	GB	
Post Office Address	4986 Fox Forest Drive	2			u	SA	, ,		
Post Office Address									
City	Lilburn	State	GA	-	ZIP	30047	Country	USA	
Name of Additional Jo	oint Inventor, if any:			J A peti	ition has bee	en filed for this u	nsigned invento	or	
Given Nar	me (first and middle [if a	iny])				Family Name of	or Surname		
	John Robert					Purki	ss		
Inventor's Signature							Date		
Residence: City	Southampton	State			Country	GB	Citizenship	GB	
Post Office Address	Immunopharmacology	Group, So	outhampto	on Gene	ral Hospital			<u> </u>	
Post Office Address									
City	Southampton	State			ZIP	SO16 6YD	Country	GB	

PTO/SB/01 (12/97)

DECLARATI		FILITY	Y OR	Attorney Docket Number					
OVPE O PATEN'	DESIGN Γ APPLICA	TION		First N	amed In	ventor	Foster, et al.		
(3'	7 CFR 1.63)					COMPLET	E IF KNOWN		
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Destaration TRADE admitted OF		Declarati Submitte	ion d after Initial	Filing Date					
with Initial Filing]	Filing (s	urcharge	Group Art Unit					
Timig		required)	1.16(e))	Examin	ner Namo	e			
As a below named inventor,	I hereby decla	are that:	:						
My residence, post office address, and citizenship are as stated below next to my name.									
I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:									
INHIBITION OF SECRETION FROM NON-NEURONAL CELLS									
the specification of which is attached hereto OR (Title of the Invention)									
was filed on (MM/DD/YYYY) 03/20/2002 as United States Application Number or PCT International									
	088,665	and	was amended on (N				(if applicable).		
I hereby state that I have reviby any amendment specificall	ewed and under y referred to ab	rstand the	•		٠.	ecification, in	cluding the claims, as amended		
I acknowledge the duty to disc	close information	on which	is material to pater	ntability a	as define	d in 37 CFR	1.56.		
I hereby claim foreign priorit certificate, or 365(a) of any P America, listed below and har certificate, or of any PCT into	CT internationa ve also identifie	al applica ed below	ation which designa , by checking the bo	ted at lea	st one co	ountry other to polication for	han the United States of patent or inventor's		
Prior Foreign Application (Numbers)	Country	7	Foreign Filing I (MM/DD/YYY			riority Claimed	Certified Copy Attached? YES NO		
PCT/GB00/03681 9922558.3	PCT GB		09/25/2000 09/23/1999						
☐ Additional foreign ap	plication numb	ers are 1	isted on a suppleme	ntal prior	rity data	sheet PTO/S	3/02B attached hereto.		
I hereby claim the benefit und	ler 35 U.S.C. 1	19(e) of	any United States p	rovision	al applica	ation(s) listed	below.		
Application Numbe			ling Date (MM/DI						
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DECLARATION - Utility or Design Patent Application

I hereby claim the benefit under 35 U.S.C. 120 of any United States application(s), or 365(c) of any PCT international application designating the United States of America, listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States or PCT International

									ose information which CT international fili		tentability as define lication.
U.	S. Parent A	pplication Number		Parent				t Filing Dat DD/YYYY		Parent Patent	
	PCT/G	BOO/03681	1				9/25/2	2000			
□ Ad	ditional U.S. or	PCT interna	itional appli	cation numb	bers are	e listed on a	suppleme	ental priority da	ta sheet PTO/SB/02	B attached hereto.	
	nventor, I hereby	appoint the	following r	registered pr	ractitio	ner(s) to pro	osecute th	is application a	nd to transact all bu	siness in the Patent	and Trademark
Customer									→		ace Customer
■ Registered	OR Registered practitioner's name/registration number listed below Number Bar Code Label Here										
,	Name				gistrati lumbe			· N	ame		egistration Number
Ranjana Kadle John M. Del Vecchio Martin G. Linihan Kevin D. McCarthy David L. Principe 40,041 42,475 24,926 35,278 39,336						Mich Patr Dani	cick J. el C. (Scalise	40,7 34,9 42,1 33,4 16,6	20 87 35	
□Additional	registered practit	ioner(s) nan	ned on supp	olemental Re	egistere	d Practition	er Inform	ation sheet PTC	D/SB/02C attached I	nereto	
Direct all o	Direct all correspondence to: ☐ Customer Number or Bar Code Label ☐ OOO 26712 ☐ OR ☐ Correspondence address below										
Name	Ranjana Kad	Ranjana Kadle									
Address	Address Hodgson Russ LLP										
Address	One M&T I	Plaza, Sui	te 2000								
City	Buffalo				:	State	New York ZIP			14203-2391	
Country	United State	es	Telepho	ne		(716) 856	-4000		Fax (716) 849-0349		
further that th	nese statements w	vere made w	ith the know	wledge that	willful	false statem	nents and	the like so mad	on information and e are punishable by atent issued thereon	fine or imprisonme	
Name of S	Sole or First	Inventor:		,		☐ A pet	ition has	been filed i	for this unsigned	inventor	
	Given Nan	ne (first a	nd middle	e [if any]))				Family Name	or Surname	
		Keith	Alan						Fost	er	
Inventor's Signature	3									Date	·
Residence	: City	Salisbur	·y	St	tate	Wiltshi	re	Country	GB	Citizenship	GB
Post Offic	e Address	The Cro	oft, South	ampton R	oad,	Whaddon					,
Post Offic	e Address		, Çı							,	
City		Salisbur	у	Si	tate	Wiltshi	re	ZIP	SP5 3DX	Country	GB
■ Addition	nal inventors	are being	named or	n the 1 suj	pplem	ental Ado	litional	Inventor(s) s	sheet(s) PTO/SB	/02A attached	hereto.
						[Page	2 of 31				

DECLARATION

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ADDITIONAL INVENTOR(S) Supplemental Sheet Page 3 of 3

Name of Additional Joint Inventor, if any:							
Given Name (first and middle [if any])				Family Name or Surname			
John Andrew				Chaddock			
Inventor's Signature						Date	·
Residence: City	Salisbury	State	Wiltshire	Country	GB	Citizenship	GB
Post Office Address	43 Bouchers Way						
Post Office Address							
City	Salisbury	State	Wiltshire	ZIP	SP2 8RW	Country	GB
Name of Additional Joint Inventor, if any:							
Given Name (first and middle [if any]) Family Name or Surname							
	Conrad Padraig				Quinn		
Inventor's Signature		·				Date	7
Residence: City	Lilburn	State	GA	Country	USA	Citizenship	GB
Post Office Address	4986 Fox Forest Drive						
Post Office Address							
City	Lilburn	State	GA	ZIP	30047	Country	USA
Name of Additional Joint Inventor, if any:							
Given Name (first and middle [if any]) Family Name or Surname							·
John Robert				Purkiss			
Inventor's Signature	Du	<u>ll</u>	<u> </u>			Date	13/06/02
Residence: City	Southampton	State		Country	GB ,	Citizenship	GB ·
Post Office Address	Immunopharmacology Group, Southampton General Hospital (OR)						
Post Office Address	ice Address						
City	Southampton	State		ZIP	SO16 6YD	Country	GB